

**Advisory Council on Health Disparity and Health Equity
July 8, 2014 Meeting Minutes
Virginia Department of Health, 109 Governor Street, Richmond, Virginia 23219
Madison Building 13 Floor Conference Room & Via Polycom
11:00 a.m. - 2:00 p.m.**

Attendees: Elizabeth Locke, PhD, PT; Cecily Rodriguez; Melissa Canaday; Portia Cole, PhD, MSW, LCSW; Emmanuel Eugenio, MD, FAAP; Linda Redmond, PhD ; Adrienne McFadden, MD, JD, FACEP, FAAEM, FCLM; Beth O'Connor, M. Ed, BA; Patti Kiger, Med (PhD);

VIA Polycom: Susan Alford, BS, MBA; Kate S. K. Lim, MT, (ASCP), FACHE, CPHQ, CPHRM; Luisa F. Soaterna- Castaneda, BS, MPH;

Absent: Gloria Addo-Ayensu, MD, MPH; Lucie Ferguson, PhD, MPH, RN; Sheila Trimiew-Johnson BA; Theresa Teekah, MA, RN, MPH-C;

VDH : Karen Reed, MA, CDE; Augustine Doe, MS, MPA, Marilyn Breslow, MSW;

Welcome

Dr. Adrienne McFadden opened the meeting and welcomed everyone and the attendees introduced themselves.

Adoption of Agenda

The July 8, 2014 meeting agenda was adopted as presented.

Approval of Minutes

The April 8, 2014 Advisory Council on Health Disparity and Health Equity (ACHDHE) meeting minutes were approved as submitted.

State Health Commissioner's Updates

Dr. Marissa Levine, State Health Commissioner thanked the group for their work and apologized for not attending the last meetings. Further, Dr. Levine shared the Virginia Department of Health's perspective on health disparity and health equity. She requested member's assistance in addressing health inequities in Virginia. Dr. Levine presented a brief PowerPoint presentation that addressed the following:

- Public health is supported by a vast array of public and private organizations. The health department works with many partners and seeks to engage more in our efforts to achieve the goal of making Virginia the healthiest state in the nation.
- The 2014 County Health Rankings from the Robert Wood Johnson Foundation outlining health outcomes and social determinant health factors in Virginia were presented. The areas where health outcomes were poor correlated with the areas where health factors were worse. The 2009 Virginia Health Opportunity Index (HOI) map recognizes disparities in the same localities.

These maps identified on the slides highlight areas where significant health equity issues in Virginia must be addressed.

- In order to best address these health inequities, we need to persuade decision makers that the investment is cost effective. We need to put a price tag on the cost of inaction to engage their investment in solutions. Today 75% of health care expenditures relate to chronic care, while only 3.5% is devoted to prevention and public health services. Further, Dr. Levine offered that public health must creatively reframe issues to bring attention to the importance of closing the gap in life expectancy. Research indicates that policy changes have the largest impact on community health. Our job in public health is to identify what needs to be done to get Virginia to health equity.
- Dr Levine concluded we need to change the context of our discussion recognizing health equity is public health, and we must engage more participants in working toward change. Further, we need to be innovative to achieve our goal of making Virginia the healthiest state in the nation.

MEMBERS FEEDBACK/RECOMMENDATION

- ACHDHE member shared that her organization is looking at three dimensional maps which confirm that the areas of greatest risk are those with high poverty; she asked what interagency strategies are in place to maximize resources and reduce duplication.
 - Dr. Levine shared there is recognition that much data is in information silos; a training is planned on Informatics to share research. The need for collaboration is being addressed at the Secretariat level and fortunately, there is also a good deal of work on the local level.

Presentation: “Increasing Community Access to Fresh Fruits and Vegetables”

Presenters: Shirley Miller, Senior Health Educator and Melanie Deel, Health Educator, Wise County Health Department.

Presenters described the Health District, the health challenges of area residents, and their innovative program to improve the diet of families in Wise County. The local health department secured a five year grant from the Virginia Foundation for Healthy Youth to fund initiatives to bring more children and their parents into area farmers markets. The managers of the market and vendors were persuaded to accept Supplemental Nutrition Assistance Program (SNAP)(SNAP was formerly called food stamps) and debit card payments and mechanisms were set up to support this. Tokens were used to make shopping easier and the health department was able to match SNAP purchases with up to an extra \$10 in tokens to encourage purchases of fresh produce. Each Saturday market had children’s activities: food preparation classes, face painting, clogging lessons, kids bucks to shop with, as well as information booths and services. The shoppers responded positively to these activities. Funding to support this initiative is now supporting implementation of a similar project in the St Paul community. Norton continues to report high traffic at its farmers market and the presenters expect continued healthy eating and positive outcomes for its children and families.

(See presentation at http://www.vdh.virginia.gov/OMHHE/healthequity/mhac_meetings.htm).

MEMBERS FEEDBACK/RECOMMENDATION:

- ACHDHE members applauded the presenters' creativity and hard work and pledged to share their innovations with others.
- *ACHDHE member suggested that future program updates be shared with the ACHDHE.
- *ACHDHE member suggested the program information be summarized and sent to other health districts and stakeholders for potential replication.
- *ACHDHE member suggested finding mini grant to keep innovative programs like this ongoing and assist local health districts develop and refine program and project with clear objectives and outcomes.

Presentation: "VDH Feeding Programs to Address the Needs of Low Income Children"

Presenter: Dr. Michael Welch, Division Director, Office of Family Health Services, Virginia Department of Health, Richmond, Virginia discussed the feeding programs managed by the VDH. The VDH Programs include:

- Special Supplemental Nutrition program (WIC- for pregnant Women, Infants and Children),
 - WIC provides food packages to pregnant and postpartum women for up to six months (longer if nursing) and children up until their fifth birthday. It is available to low income residents who must show proof of Virginia residency but not of legal immigration presence. Applicants must also show documentation of income qualification and must be at nutritional risk. Participants receive education, supplemental nutrition and breast feeding support.
- Child and Adult Care Food programs
 - Child and Adult Care Food Program reimburses childcare and adult day care providers as well as to emergency shelters for participants whose income is less than 185% of the poverty level.
- Summer Food Service program.
 - The Summer Food Service program provides congregate meals to children while school is out. Feeding sites qualify by location – typically located at a school where at least 50% are eligible for free lunch. The program is challenged when schools do not sponsor the site. It is also difficult to implement in areas where there are few non-profits and transportation is a problem.

These programs are in their 40th year; the US Department of Agriculture turned over management to state health departments in 2010. These programs bring in over \$2 billion dollars to Virginia. Dr. Welch also discussed the challenges the programs face and provided some data on population participation. A new management system, Cross Roads is now in place to capture data, study results and increase efficiencies.

(See presentation at http://www.vdh.virginia.gov/OMHHE/healthequity/mhac_meetings.htm).

MEMBERS FEEDBACK/RECOMMENDATIONS: (* feedback received following the meeting)

- ACHDHE members asked questions about the method in which the user information was captured and indicated that the data may be inconclusive as Hispanics are not identified.
 - Dr. Welch indicated that the new system being rolled out will capture ethnicity (Hispanic/not Hispanic) as well as race. However, it will not collect information on preferred language spoken.
- ACHDHE member suggested that Dr. Welch's team work more closely with VDH's Division of Child Family Services, as they are working on the Text4baby project around the state.
- ACHDHE member also encouraged actively promoting the Text4baby free service and appointment reminders as a tool for their clients.
- *ACHDHE members suggested that VDH Feeding programs initiate a refined data collection process that includes training on how to specifically capture data on Hispanics and other populations that are impacted by health, social, and economic disparities.
- *ACHDHE member indicated that the data captured is too broad and does not allow for analysis on regional differences in participation.
- *ACHDHE member suggested that language access plans be developed to ensure meaningful access of Women Infant and Child (WIC) program to Limited English Proficient individuals.
- *ACHDHE member would like to ensure that resources such as the language line are consistently offered and used by all local health departments during WIC encounters with Limited English Proficient clients.
- *ACHEHE member suggested the need for training on how to ask demographic questions.
- *ACHDHE member suggested ongoing updates on efforts to eliminate health disparity gaps in this area.
- *ACHDHE member suggested more analysis of gap between those enrolled and those qualified but not enrolled. Also, the member suggested the exploration of the enrollment barriers.
- *ACHDHE member suggested using a different name other than "Feeding Programs."
- *ACHDHE member suggested teaching out to Planning District Directors as potential partners.
- *ACHDHE member suggested the identification of the strengths of existing summer school program models.
- *ACHDHE member suggested the identification of areas to improve summer school program models.
- *ACHDHE member indicated the need for data to determine if we are closing health disparity gap.
- *ACHDHE member suggested that VDH determine programs are reaching greater than twenty percent of all eligible children.
- *ACHDHE member suggested increasing baseline target to thirty percent of all eligible children served through VDH Feeding Program by 2020.
- *ACHDHE member offered the following global recommendation on content for future program presentations to include the following:
 - Funding sources.
 - Any regional population data.

- Marketing and outreach efforts.
- Interagency collaboration efforts.

ACHDHE Proposed Study:

This item was not included on this meetings' agenda, as Dr Portia Cole was not able to have Dr. Tamara Holmes (research partner) attend. The item will be rescheduled at the October 14, 2014 meeting.

ACHDHE Procedural Guidelines Vote:

The council adopted the revised ACHDHE procedural guidelines document with the following as indicated below:

- Article III, Section 4, Secretary: Secretary position eliminated.
- Article III, Section 4, Chair Emeritus position newly created position will be included within the guidelines. The description is listed below.
 - Chair Emeritus Position Description
 - In the year following his/her term of office as chair, the chair becomes the Chair Emeritus.
 - He/she remains an officer and attends meetings offering support as requested.
 - The Chair Emeritus may perform duties as the Chair may prescribe.
- Article IV, Section 8: The URLs be removed from the document
- Article V, Section 3: The URLs be removed from the document and "Virginia" will be added in front of "Town Hall" text

(See ACHDHE procedural guidelines at

http://www.vdh.virginia.gov/OMHHE/healthequity/mhac_meetings.htm)

NEW BUSINESS

Presentation Feedback form

ACHDHE members discussed the utilization of the Presentation Feedback form as a means to capture feedback/recommendations for the State Health Commissioner. The Chair encouraged members to use the presentation feedback forms as an additional means of providing feedback beyond what was shared during the meeting. Further it was noted that comments on the feedback form will be reflected in the meeting minutes as aggregate comments from the council. Members were encouraged to send feedback to Augustine Doe within three days after the meeting.

ACHDHE Leadership Elections

The ACHDHE Chair announced that in order to comply with ACHDHE guidelines, election of officers will be held this year as follows:

Duties of Officer

Chair

- Preside at all membership meetings.
- Arrange alternate leadership in the event Chair is unable to attend a meeting. Officers filling in shall preside in the following order: Vice Chair, Chair Emeritus.

- Provide input on and review all agendas in advance of meetings:
 - Keep discussions forward-moving and focused on agenda items
 - Keep meetings within scheduled time-frame
 - If agenda items must be deferred, confer with members to develop a plan to address deferred items
 - Call special meetings
 - Appoint appropriate subcommittee chairs, if necessary
 - Provide oversight to ensure the smooth operations and activities of the general body and subcommittees

Vice Chair

- Serve as Chair in the absence of the Chair.
- Assist the Chair in providing oversight to ensure the smooth operations and activities of the general body and subcommittees.

Election of Officer Timeline

- Members will nominate for the new leadership at the **October 14, 2014** meeting
 - Members not attending the October meeting are encouraged to send nominations to Augustine Doe at Augustine.doe@vdh.virginia.gov.
- By **October 21, 2014**, nominees will notify OMHHE staff (Augustine.Doe@vdh.virginia.gov) if they are able and willing to serve within the nominated positions.
 - Note: Members willing to serve will be asked to send a brief bio that will be sent with the slate of officers.
- OMHHE will compose the ballot and send Nominated Officer Slate via Survey Monkey to all members to vote on officers by **October 28, 2014**. (**Note:** OMHHE will assign numbers for the survey monkey to avoid duplication and keep process anonymous).
- Last day for ACHDHE members to Vote is **November 4, 2014**.
- Officer Slate will be submitted to the Health Commissioner by **November 11, 2014**.
- New Officers will be introduced to ACHDHE Members at the **December 9, 2014** meeting or **January 13, 2015**, meeting.

Announcements and Updates

Office of Minority Health and Health Equity (OMHHE) Updates

Dr. Adrienne McFadden announced the following:

- Ms. Marilyn Breslow joined the OMHHE team as the Culturally and Linguistically Appropriate Service (CLAS) Specialist. Ms. Breslow has lots of experience. Also, a new Health Workforce Specialist was hired recently and will be starting by the end of the month.
- OMHHE Division of Multicultural Health and Community Engagement (DMHCE) is active with our CLAS activities working with the Virginia Medical Interpreter Collaborative (VMIC) and Virginia Medical Interpreter Data base website. DMHCE is also working with the VDH Office of Family Health Services, a number of faith-based communities and other non-profits in support of the Million Hearts Campaign to recruit 100 congregations to prevent one million heart attacks and strokes over the next five years.

- The OMHHE Primary Care Office is in the midst of several workforce incentive program application cycles. Applications were due June 30; the process of screening applications and referring candidates for review is in high gear. The Virginia J1 Visa waiver guidelines have been reworked and our application process will start October 1, 2014. This program allows foreign medical graduates to work in Virginia if they work in medically underserved areas; the requirement that they return to their home country for two years after study is waived. The Student Loan Repayment Program is open to all physicians, nurses, counselors, and other health care professionals. OMHHE created a partnership with the Virginia Healthcare Foundation (VHCF) to provide the required 1:1 cash match for health providers applying for the Federal Virginia State Loan Repayment Program (VA-SLRP).
- Virginia's State Rural Health Plan (VSRHP) is being implemented starting with newly formed coalitions led by each of our Critical Access Hospitals (CAH).
 - ACHDHE member wanted to know if Physical Therapists (PT) could be included in the loan repayment program as the move would help get PTs into rural Virginia which is currently a challenge. Dr. McFadden informed the council that the professions listed are based on federal regulation. Nothing is before the general assembly to recruit for different health care professionals. A good place to start is to evaluate data to identify needs.

Members' Update:

- Dr. Eugenio invited VDH OMHHE participation in the Asian American Association of Central Virginia Health Fair on October 25, 2014 at the Eastern Henrico Recreation Center and indicated there will be no cost for VDH participation. Dr. McFadden said that the OMHHE will staff a table there.
- Virginia Board for People with Disabilities will be publishing its 2014 assessment of Virginia disability services system, a comprehensive overview of services (transportation, early intervention, health, housing, education, ...) board identified areas of concerns and recommendations for systemic change to improve the quality and accessibility of services to Virginians of all sorts of disabilities. The assessment may be accessible in mid to late August online, via CDs, and limited print copies.

ACHDHE Action Items

ACHDHE members will complete "Presentation Feedback" forms and send form to Augustine Doe at Augustine.Doe@vdh.virginia.gov within three days following the meeting.

Public Comment: None

The meeting was adjourned at 1:48 pm.

Next ACHDHE MEETING:

Date: October 14, 2014 Time: 11:00am – 2:00pm

Location: 109 Governor Street, Richmond, Virginia 23219 **and** via Polycom as requested.

Respectfully submitted by: Augustine Doe, Health Equity Specialist

Minutes reviewed by: Dr. Elizabeth Locke, Chair